



KING COUNTY MENTAL HEALTH BOARD

QUALITY COUNCIL MEETING SUMMARY

Day/Date: Monday, April 23, 2001
Time: 3:30 – 5:00 PM
Location: Exchange Building: 810 Second Avenue, Conference Room 6A, Seattle, WA

Members Present:

Eleanor Owen
Katherine Halliburton
Jack Fuller

Members Excused:

Janny Becker

Members Absent:

Alberto Gallego

Staff:

Shelle Crosby
Alan Weisser – Clinical Director United Behavioral Health (UBH)

Guest Member

Sheila Fries – Valley Cities Counseling and Consultation

Note Taker:

Irma Van Buskirk

Call To Order

Eleanor called meeting to order at 3:35pm.

Approval of Last Minutes

A quorum was present. The March minutes were approved as written.

Announcements

Katherine announced her intended marriage and subsequent move to Texas in June. The Quality Council (QC) members thank Katherine for her many years of dedicated service.

Shelle announced that the state Mental Health Division (MHD) desires to contract with a consumer and a family member for a six-month period of time to assist auditors with quality assurance/site visit review teams. Members were encouraged to circulate this letter to individuals they felt might be qualified.

RSN/UBH Update

Shelle mentioned the April 13, 2001 death of Joanne Asaba, Manager, Mental Health, Chemical Abuse and Dependency Services Division. Jackie MacLean, Assistant Manager is currently acting as interim manager. As of today's meeting, there has been no official announcement regarding Joanne's position.

Alan Weisser, Clinical Director of UBH spoke of ongoing contract implementation. UBH distributed copies of their policy/procedures manual to providers/client advocates, requesting feedback.

State Performance Indicators

Shelle asked for comments on the November 29, 2000 draft version of the Washington State Department of Social & Health Services, Mental Health Division, Framework for Defining and Displaying System-Wide Mental Health Performance Indicators.

- Katherine noted that the Greater Columbia Regional Services Network (RSN) appears to be serving a significantly large portion of children.
- Jack mentioned the need for clarification regarding qualifications and assumptions.
- Alan noted that with this type of data, there is always room for speculation.
- Shelle agreed that assumptions need to be listed to assist with data interpretation.
- Are state of the art technologies being applied in treatment?
- A goal of best practices appears to be the ultimate purpose.

Quality Report Card

The QC began discussing how to design a report card that would focus on system quality. Shelle handed out two documents, developed in 1994 and 1995, that demonstrated the thinking at that time about how to measure quality. She encouraged members to review the handouts and think about measures that could be included in a quality report card. Any measures selected should be able to be clearly operationally defined, and the data required should not be onerous or costly to collect..

Eleanor asked how do we measure quality of care? Suggestions included:

- the wait time in emergency rooms;
- the wait time to get into residential treatment;
- the wait time between request for crisis services and face-to-face response;
- information about how clients are educated about their rights and about the services available, so they can make realistic choices about where to go for service;
- information about active rehabilitation efforts for clients who have been in the system for a long time;
- information about the quality of interventions, and whether state-of-the-art interventions are being used.

Handouts at this Meeting

Quality Indicators

Measures of Quality and Equitable Access

Future Agenda Items or Enclosures

System Quality Report Card

Continued discussion on Quality Council role and membership

Next Meeting

The May meeting has been canceled.

Next scheduled meeting will be:

Monday, June 25, 2001

Exchange Building, 821 Second Avenue, Conference Room 6A

3:30 – 5:00 PM

Meeting adjourned at 5:00 PM